



Board of Pharmacy

Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Acting Secretary

*Jennifer L. Hardesty, Board President – Deena Speights-Napata, Executive Director
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January 31, 2023

The Honorable Melony Griffith
Chair, Finance Committee
3 East, Miller Senate Office Building
Annapolis, MD 21401-1991

RE: Senate Bill 64 – HIV Prevention Drugs – Prescribing and Dispensing by Pharmacists and Insurance Requirements - Letter of Support with Amendments

Dear Chair Griffith and Committee Members:

The Maryland Board of Pharmacy (the Board) respectfully submits this letter of Support with Amendments for Senate Bill (SB) 64 – HIV Prevention Drugs – Prescribing and Dispensing by Pharmacists and Insurance Requirements. SB 64 will authorize a Maryland-licensed pharmacist to prescribe and dispense FDA-approved postexposure prophylaxis (PEP) for the purpose of HIV prevention. SB 64 will require a pharmacist to determine whether certain HIV medications are appropriate, perform a CLIA-waived HIV test, provide appropriate counseling, and provide notice to the patient’s primary care provider or provide the patient with a list of healthcare providers. SB 64 will require a pharmacist to complete a Board-approved training program on the “availability of preexposure prophylaxis and on the use of postexposure prophylaxis” prior to prescribing and dispensing PEP. SB 64 will require the Board to approve or develop a training program, in consultation with the Board of Nursing, Board of Physicians, and other relevant stakeholders, including the Maryland Center for HIV Care Services, on the availability of preexposure prophylaxis (PrEP) and on the use of PEP, that includes information about financial assistance programs for PrEP and PEP. SB 64 will require the Board to adopt regulations, in consultation with the Board of Nursing and Board of Physicians, establishing procedures for creating and disseminating a list of entities that receive funding from the Ryan White HIV/AIDS program.

The Board is supportive of the appropriate expansion of the practice of pharmacy; however, the Board has concerns regarding provisions contained in SB 64, and thus, has proposed amendments.

The Board submits that clinical therapeutic decision making is incorporated into the curriculum of pharmacy schools, thus pharmacists are currently capable of discussing the availability of PrEP and use of PEP. The Board understands that healthcare practitioners must be highly skilled and qualified to ensure public safety; however, requiring a pharmacist to complete an additional training program to engage in a task covered in their core curriculum is unnecessary to protect public health and neglects to value the competence that a pharmacist has demonstrated by

obtaining a degree from a school of pharmacy, completing an internship, and passing the NAPLEX and MPJE. Further training is duplicative and unnecessary.

Should a training program be deemed necessary, the pharmacist-members of the Board are qualified to review and select an appropriate training program without the oversight of other health occupations boards and outside stakeholders.

Knowledge of financial assistance programs is unnecessary to evaluate a patient's concerns, review patient-provided information to screen for contraindications, and determine the potential effectiveness of a medication. Information regarding financial assistance programs should be housed at the Department of Health.

Creating, maintaining, and distributing a list of providers to a patient may become an administrative burden to certain pharmacists. A pharmacist is not required to provide this type of information to other patients; however, a pharmacist may always use their independent professional judgment to provide relevant information. The Board recommends that a pharmacist's independent judgment not be tethered to notice provisions that may not be appropriate at all times. The Board would suggest that a pharmacist could include general information, in the form of a link or QR code, regarding the Ryan White HIV/AIDS Program on the copy of the medical record that is provided to the patient or provide verbal notice. The Board does not support regulations that would create unnecessary administrative burdens in the practice of pharmacy.

Based on the above-mentioned items, the Board recommends the following amendments:

Amendment 1

On page 3, strike line 31 beginning with "CDC GUIDELINES" and ending with "MEANS." On page 4, strike lines 1 – 4 beginning with "PREEXPOSURE PROPHYLAXIS" and ending with "DISEASE CONTROL AND PREVENTION."

Amendment 2

On page 4 strike ", IN THE CDC" from lines 9 – 10.

Amendment 3

On page 4 strike ", IN THE CDC" from lines 15 – 16.

Amendment 4

On page 4 strike lines 17 – 21 beginning with "RYAN WHITE" and ending with "HARD-TO-REACH POPULATIONS."

Amendment 5

On page 5 insert ", AS APPLICABLE," after "COUNSELING" and before "TO THE PATIENT" on line 4.

Amendment 6

On page 5, strike ", AT APPLICABLE," from line 9.

Amendment 7

On page 5, strike lines 17 – 20 beginning with “THE PATIENT WITH A LIST” and ending with “HIV/AIDS PROGRAM.” Insert “ENCOURAGE THE PATIENT” before “TO” on line 20. Insert “A PHYSICIAN, PHYSICIAN ASSISTANT, NURSE PRACTITIONER, CLINIC, MARYLAND PUBLIC HEALTH AGENCY, OR OTHER HEALTH CARE PROVIDER” after “CONTACT” and before “REGARDING FOLLOW-UP” on line 21.

Amendment 8

On page 5 strike lines 28 – 33 beginning with “BEFORE PRESCRIBING” and ending with “INFORMATION ABOUT.”

Amendment 9

On page 6 strike lines 1 – 12 beginning with “FINANCIAL ASSISTANCE” and ending with “HIV/AIDS PROGRAM.”

The Board respectfully requests a favorable report on SB 64 with the proposed amendments.

If you would like to discuss this further, please do not hesitate to contact Deena Speights-Napata, MA, Executive Director at deena.speights-napata@maryland.gov or (410) 764-4753.

Sincerely,

A handwritten signature in blue ink, appearing to read "Deena".

Deena Speights-Napata, MA
Executive Director